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FISKE FUND PRIZE DISSERTATIONS OF THE RHODE ISLAND MEDICAL SOCIETY.—NO. II.

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AT a meeting of the FISKE FUND TRUSTEES, held at *Providence, R. I.*, on the 6th day of June, A. D. 1836, it was decided that the Dissertation bearing the motto, "*Opinionum Commenta delet dies, Naturæ judicia confirmat*," and which, on breaking the seal of the accompanying letter, was found to be written by David King, Jr., M.D., of Newport, was entitled to the premium of *forty dollars* offered for the best Dissertation on the question, "What are the causes and nature of *Purpura Hæmorrhagica*, and the best mode of treatment to be employed therein?" In awarding the premium to this Dissertation, neither the Trustees nor the Rhode Island Medical Society hold themselves responsible for the doctrines herein inculcated, treatment recommended, or opinions advanced.

Signed,

CHARLES E. ELDRIDGE,
SAMUEL WEST,
WILLIAM G. SHAW.

"*What are the causes and nature of PURPURA HÆMORRHAGICA, and the best mode of treatment to be employed therein?*"

The history of *Purpura Hæmorrhagica*, cannot be traced back to a remote antiquity. Willan* and Bateman† have exhibited much learning in regard to the descriptions of it, by the most distinguished writers of the 16th, 17th, and 18th centuries. From its first notice by Amatus Lusitanus, in 1550, who described it under the denomination of "*Morbus Pulcaris sine febre*," to the time of Willan, who designated it by the term "*Purpura Hæmorrhagica*," the disease was noticed by writers under a variety of names. In the north of Europe, and Great Britain, where the scurvy prevailed, very generally, it was considered under the title of *Scorbutus*. Sydenham, Eugalenus and Lister, according to Willan, describe *purpura hæmorrhagica* under the name of *scorbutus*. Riverius records cases of this disease, in his *Centuries*, under the head of

* On Cutaneous Diseases, by Robert Willan, M.D. F.A.S. Philadelphia edition, 1809, vol. 1, pp. 345.

† Practical Synopsis of Cutaneous Diseases, by Thomas Bateman, M.D. F.L.S. Philadelphia edition, 1818, pp. 106.

malignant fever. Rombergius and Graaf treated of it under the appellation of "*Petechiæ sine Febre*;" Raymann under that of "*Petechiæ mendaces*;" Sauvage under that of "*Stomacace universalis*," and Adair under that of "*Hæmorrhœa petechialis*."

Nothing, substantially, practical, in relation to this disease, can be drawn from the imperfect and rude sketches of its phenomena, previous to the time of Willan. The works of Willan, Bateman, Parry, Rayer, and Biett, furnish materials for a history of its symptoms, and give out hints, which may, in the process of time, lead to a more successful investigation of the agents that produce it, and of the true pathological condition in which its nature consists.

Purpura Hæmorrhagica derives its name from the two leading characteristics of the disease, the purple spots, consisting of sanguineous extravasations in the skin, or in the subcutaneous cellular tissue, and the hæmorrhages, which most generally occur from the mucous membranes.

The spots which appear on the skin, in *purpura hæmorrhagica*, are divided by Rayer* into *petechiæ* and *ecchymoses*. The *petechiæ* are of a circular form, and of the size of large fleabites, from half a line to a line and a half in diameter. The *ecchymoses* are irregular patches, formed by the coalescence of many *petechial* spots. When large they are, properly, compared to marks produced on the skin by external violence, as from blows, or the strokes of a whip. The *petechiæ* and *ecchymoses* consist in the spontaneous effusion of blood, sometimes under the cuticle, sometimes in the superficial layers of the dermoid tissue, and sometimes in the subcutaneous cellular tissue. Hence arises one of the distinguishing characters of the *petechiæ*, the persistence of their color under pressure. The cuticle over the spots has been observed by Willan and Bateman to be smooth and shining, and often so delicate as to be ruptured by the slightest scratch, or pressure. This is more easily ruptured on the mucous membranes, owing to the extremely delicate texture of its epithelium. In some cases the cuticle is elevated in the form of vesicles filled with blood, as noticed by Willan, Riel, Bateman and Biett.

The *petechiæ* and *ecchymoses*, in *purpura hæmorrhagica*, appear first on the legs; then on the thighs and arms; the trunk, neck and face, according to Rayer, are more rarely affected by them. Biett has occasionally noticed them on the eyelids.† "Sometimes they are uniformly distributed over the body, and sometimes in irregular patches."‡

The color of the *petechiæ* is at first of a bright red, afterwards purple, or livid, and when about to disappear of a yellowish or brownish hue. Willan has remarked, that the spots are largest and most vivid in the evening, or night; during the day, they are smaller and of a yellowish hue. They usually continue to increase in number for the space of 10, 15, or 20 days.§ "Many of the patches disappear in a week or two, whilst fresh ones appear in other places." The skin in the early

* *Traité Théorique et Pratique des Maladies de la Peau, fondé sur de Nouvelles Recherches d'Anatomie et de Physiologie Pathologiques.* Par P. Rayer. A Paris, 1827. Tome second, pp. 158. Art. *Hémorrhagie.*

† Clinical Lectures of Biett, Physician to Hospital St. Louis, Paris. By Cazenave and Shedel.

‡ Willan.

§ Rayer.

stages of the disease preserves its natural sensibility and color, in the intervals between the petechiæ and ecchymoses, whether cutaneous or subcutaneous. When the disease has continued for some time, it acquires a yellowish tinge. As the color of the petechiæ and ecchymoses varies with the time from their first appearance, you perceive on the skin, at the same time, various colored spots, some of a bright red appearance, others purple or livid, others of a brownish or yellowish hue.

The disposition to effusion of blood, manifested in the skin, and in the subcutaneous cellular tissue, extends to the different mucous membranes, producing in their substance petechiæ and ecchymoses, or upon their surfaces hæmorrhages. Thus ecchymoses are seen upon the gums, the palate, the tonsils, the interior of the mouth, and lips. The tongue is sometimes covered with ecchymoses, and engorged with blood so as to be double its normal size. Hæmorrhage has been known to arise from the mucous membrane lining the nostrils, fauces and gums; the inside of the lips, cheeks, and eyelids; from the tongue, bronchiæ, stomach, intestines, uterus and vagina; from the kidneys, bladder and urethra. Of these hæmorrhages, epistaxis is most frequent in children, uterine hæmorrhage in women, and pulmonary and intestinal hæmorrhages in adults.*

The serous membranes are sometimes the seat of sanguineous effusion. Thus Cazenave alludes to a case, where an effusion of blood took place from the cerebral arachnoid membrane. Ecchymoses frequently occur beneath the mucous and serous membranes, and in the parenchymatous structure of different organs.

The hæmorrhages from the mucous membranes may precede, accompany or follow the appearance of petechiæ and ecchymoses on the skin. They occur at intervals more or less remote; sometimes being periodical, taking place, perhaps, at a particular hour every day; and sometimes there is a slow and constant exhalation of blood.

The local symptoms of purpura hæmorrhagica sometimes manifest themselves without previous constitutional disturbance. Dr. Bielt relates, in his lectures, the case of a young man, who went to bed in perfect health, and on the succeeding day his skin was covered with ecchymoses, and blood issued in quantities from his mouth and nostrils. This form of purpura hæmorrhagica is the true "*Apyrétique Hémacélinose*" described by Rayet. "It may be preceded by epistaxis, hæmatemesis, hæmoptysis, or other hæmorrhages from the mucous membranes. The petechiæ and ecchymoses manifest themselves upon the surface of the body without heat or pain. Children continue their plays, and adults engage in their habitual pursuits. The pulse, respiration and digestion, the secretions and excretions, are natural. The intellectual faculties are exercised as in health. The exploring of the thorax by the stéthoscope and the examination of the abdomen, discover no alteration in the organs contained within these cavities."

In general, however, according to the experience of Bateman and Parry, febrile symptoms precede the appearance of the purpurine spots, and accompany the disposition to hæmorrhagic action.

* Rayet.

Thus, before the occurrence of the local symptoms, there is languor, depression of spirits, and loss of energy in the muscles of voluntary motion. Excruciating pains in the limbs, and great tenderness and irritability of the surface, sometimes immediately precede the appearance of petechiæ and ecchymoses. A morbid state of the circulating and respiratory systems, with general derangement of the secretions and excretions, is observed in most cases. The pulse varies according to the energy of the system, and the period of the disease. Recorded cases show it to be sometimes feeble and excited, sometimes slow and laboring, sometimes frequent, firm and resisting.

The prominent symptoms are seated sometimes in the lungs, attended with pain, dyspnœa, and cough. Sometimes the heart is more particularly affected, attended with frequent syncope; sometimes the abdominal viscera, especially the liver, characterized by deep-seated pains in the precordia and abdomen, tension and tenderness of the epigastrium and hypochondria, with intestinal derangement. In other cases the brain is the prominent point of congestion.

"When the disease has continued some time, the patient becomes sallow, or of a dirty complexion, and much emaciated, and some degree of œdema appears in the lower extremities, which afterwards extends to other parts."

Purpura hæmorrhagica has no regular duration. It continued from 14 days to 12 months and upwards in the cases which came under the observation of Dr. Willan. The duration of the disease depends much on the state of the constitution, the degree of hæmorrhagic action, and the tissue or organ upon which it may concentrate its force. Thus where there is no constitutional disturbance, it may remain for years. Bateman alludes to a case related by Dr. Duncan, "which occurred in a boy, who was employed for several years by players to carry their sticks, and whose skin was constantly covered with petechiæ, and exhibited vibices and purple blotches, wherever he received the slightest blow." He continued thus for years, in apparent good health, till a profuse pulmonary hæmorrhage caused his death. Profuse hæmorrhages sometimes contribute to a restoration of health; but, most generally, to a fatal termination. Bateman mentions one case in which severe catamenial flooding restored the patient to health, but he alludes to many cases in which profuse pulmonary hæmorrhage produced death. An effusion of blood over the glottis, by obstructing respiration, caused the death of the patient in a case related by M. G. Monod.* A fatal effusion of blood upon the brain is recorded in the Transactions of the Medico-Chirurgical Society of Edinburgh. In general, a fatal termination occurs in the manner described by Rayer. The hæmorrhages become more frequent and copious, the blood more and more serous, the petechiæ and ecchymoses more numerous, and of a deep-brown color. The face acquires a cachectic pallor, and the surface of the body a livid or yellow tinge. The blood retires from the extremities, convulsions supervene, and death soon follows.

Causes of Purpura Hæmorrhagica.—This disease occurs at every

* Casenave.

period of life, and in persons of various constitutions. The hæmorrhagic tendency seems in some cases to be constitutional; depending, probably, on some peculiarity of texture in the organic nerves, increasing the excitability of the capillary and exhalent systems. Rayer has found it to prevail, at Paris, chiefly among children of feeble constitution, poorly fed, and inhabiting low and damp places, and among females of nervous temperament and of sedentary habits, subjected to the influence of the depressing passions, or enfeebled by acute or chronic diseases. "It has sometimes occurred as a sequela of smallpox and of measles, and sometimes in the third or fourth week of puerperal confinement."* Suppression of habitual discharges, particularly the hæmorrhoidal, is noticed by Dr. Stoker† as an exciting cause of the disease. Bateman and Macbride‡ have noticed it as a consequence of the action of mercury upon the system. It is, probably, produced by impure air and improper food, in the crowded receptacles of poverty and wretchedness in our large cities. Dr. Graves§ says it is frequently produced among the lower classes of Dublin, by a salt diet. Huxham has recorded, in the *Philosophical Transactions*,|| a singular instance of purpura hæmorrhagica produced by drinking sea-water. We take the narration of this case from Percival's works.¶

"A young lady, aged 16, tall, thin, and of a delicate constitution, though in tolerable good health, was advised to use sea-water, on account of a strumous swelling and inflammation of her upper lip. She drank a pint of it every morning for ten days successively, which did not pass off freely by the usual evacuations. At the end of this period, she was suddenly seized with a profuse discharge of the catamenia, was perpetually spitting blood from the gums, and had innumerable petechial spots on different parts of her body. Her pulse was quick, though full; her face pale and somewhat bloated; and her flesh soft and tender. She was often faint, but soon recovered her spirits. The flux from the uterus at length abated; but that from the gums increased to such a degree, that her apothecary took a little blood from her arm. From the orifice blood continually oozed for several days. At last a hæmorrhage from the nose came on, attended with frequent faintings, in one of which she at length expired, choked, as it were, with her own blood. Before she died, her right arm was mortified from the elbow to the wrist. And it is further to be remarked, that though blood let from her some weeks before she began the use of sea-water, was sufficiently dense, yet that drawn in her last sickness was mere putrid and dissolved gore."

The predisposing and exciting causes of this disease cannot always be satisfactorily explained, especially when it occurs in the midst of apparent health, and in persons enjoying the benefit of pure air, and every advantage of fortune and luxury.

Pathology.—The pathology of this disease is the most important, as

* Bateman † *Pathological Observations on Dropsy, Purpura and Influenza, and the morbid changes of the blood, and their influence in the production and cause of these diseases, illustrated by select cases and dissections.* By Wm. Stoker, M.D. Dublin, 1824. Part 1st.

‡ *Experimental Essays, Medical and Philosophical.* By David Macbride. London, 1767. Pp. 153.

§ *Dublin Journal.* || Vol. 53, p. 6. ¶ *Essays, Medical and Experimental,* by Thomas Percival, M.D. F.R.S. et S.A. London, 1783. Vol. 2, pp. 118.

well as the most obscure subject of consideration. No satisfactory explanation of its pathology has been offered to the medical world. Its external signs have not been truly interpreted. The invariable morbid condition of the system, or part of the system, which gives rise to the phenomena of the disease, has not been accurately ascertained by pathologists.

The proximate cause of this disease has been variously explained by different authors. Dr. Duncan, Jr.* has ascribed it to the following circumstances. "1st. Increased tenuity of blood, allowing it to escape from the superficial extremities of the minute arteries. 2d. Dilatation of the mouths of those arteries allowing natural blood to escape. 3d. Tenderness of the coats of the minute vessels, which give way from the ordinary impetus of the blood. 4th. Increased impetus of the blood rupturing healthy vessels. 5th. Obstructions in the vessels causing rupture, with natural impetus, and without increased tenderness. 6th. Two or more of these causes may act simultaneously, or successively."

Dr. Bree† attributes purpura to compression of the brain, which by diminishing the energies of the nervous system, deprives the exhalent vessels of their contractile power. To substantiate his doctrine, he adduces cases in which petechiæ and ecchymoses upon the skin occurred in connection with apoplexy and paralysis, and in which the symptoms of purpura were removed by the antiphlogistic treatment, which relieved the brain from compression.

Mr. Plumbe‡ considers it as resulting from tenderness of the superficial vessels, caused by congestion in the hepatic and gastric circulation, and the consequent interruption of the process of nutrition.

Dr. Stoker§ ascribes the origin of the disease to an imperfect and irregular sanguification, the blood not undergoing its salutary and accustomed changes in the pulmonary and hepatic systems. The morbid condition of the blood, he thinks, is the cause of the general oppression, the dyspnœa, the articular pains, the oppressed pulse, the congestion in the portal circle, which, often, accompany this disease. The observations of Dr. Stoker, in relation to this disease, though mingled with many of the exploded notions of the humoral pathology, are enriched with many practical suggestions, in regard to the pathological states of the system, and the therapeutical measures most proper to counteract them.

M'Intosh thinks that it may be owing to a primary affection of the lungs, causing "general functional derangement of many organs, which at last produces a great change upon the blood." "Since my attention became directed to the investigation of the probable causes of petechiæ, I have not in one instance failed in detecting disease of the lungs, and particularly of the mucous membrane, by auscultation; and the observations, so made, have been confirmed upon examination after death." In one rapidly fatal case of purpura hæmorrhagica, he detected the rale

* Edinburgh Med. and Surgical Journal, 72d No.

† Remarks on the cause of Purpura, by Robert Bree, M.D. F.R.S. Med. and Phys. Journal, London, vol. 21, pp. 321.

‡ Practical Treatise on Diseases of the Skin. London, 1824. § Pathological Observations, &c.

crepitant in some parts of the chest, and the rale muceux in others. Rayer, however, observes, that, in the simplest form of purpura, the true "apyrétique hémacélinose," both auscultation and percussion fail to detect any disease of the lungs. This practical hint thrown out by M'Intosh, deserves the consideration of pathologists.

(To be continued.)

ON THE LANCING OF INFANTS' GUMS.

THIS is a point in which almost all medical men disagree, and on which dentists are often called upon to give an opinion, and to operate. If we were to refer to public opinion, to form a judgment as to the propriety of performing this operation, we should find, that some mothers consider the lives of their children owing to its having been performed, while others equally deplore the bad practice that was adopted in their case, as giving unnecessary pain, and retarding the appearance of the teeth. That they both are right, and both are wrong, is what we shall endeavor to explain.

Those who have been a witness to the convulsions of a child, and to the instantaneous relief afforded by this operation, will have some difficulty in not believing it to be infallible; but as the most powerful poisons are the most efficacious remedies in the hands of a skilful person, so the lancet is most beneficial when judiciously used, but most pernicious if improperly so. The more easily to understand this, it will be necessary to return to the process of teething.

It will be recollected we stated, that the teeth were situated beneath the gums in each jaw, and that it was the pressure of the edge of the tooth on the internal part of the gum that caused the irritation and pain; now the depth the tooth has to perforate being considerable, it stands to reason that if the gums are lanced at the first period of inflammation, they will reclose, and as often as the irritation returns, the operation must be repeated; besides which, the gums will become harder each time they reunite, which will render it still more difficult for the tooth to pierce them. The impropriety, therefore, of performing it at this period must be evident, and will account for the *bad practice* complained of. But, when the teeth are sufficiently advanced, so as to show their presence by a white mark, caused by their pressure on the internal part of the gums, then the lancet may, nay, *ought* to be used without delay; for the gums cannot again completely reclose, and the tooth comes through without giving any more pain.

In all other cases, the lancet should only be used when all other efforts have failed. But if, notwithstanding all our endeavors, the inflammation and irritation continue and cause excessive fever, and frequent returns of the convulsions are apprehended, it must then be left to the sagacity of the medical attendant when he ought to lance the gums; and we have only in these cases to recommend that the wound may be as deep as possible, and directly over the teeth that are supposed to cause the pain.

Relief should be afforded, at the first period of irritation, by giving the child something to bite. All authors recommend the finger as the best thing, because the child will keep it when it refuses everything else ; but the finger cannot always be given ; above all, when some of the teeth have pierced the gums. A piece of *India rubber*, the form of a finger, is, without exception, the safest and most beneficial ; since, from its elastic nature, it cannot harden the gums nor splinter the teeth, which coral, ivory and gold are apt to do ; and yet it is sufficiently hard to answer the proposed end. When the child has made its gums sore from biting it ; for, finding nothing hard to hurt them, they will bite with all their might, the *India rubber* may be dipped in a little honey and water, which will soothe the gums, and be agreeable to the child. In cold weather it will be necessary to dip it in warm water, or hold it before the fire for a short time, for cold will harden it, but warmth will instantly restore it to its elasticity.

Anodyne necklaces—the virtues of a gold ring—and sundry other specific virtues may (*with faith*) do good ; hard biscuits, or any other ingredient that dissolves in the mouth, are to be objected to, as filling unnecessarily the stomach.

It sometimes happens that children are born with one or more teeth above the gums ; in all such cases, it is advisable to have them removed on account of the inconvenience and dangerous consequences that may result to the mother by their being kept. Particular note should be taken of this circumstance, and communicated to the dentist who has the charge of the second dentition, otherwise it may happen (particularly at school) that the second teeth which had supplied the place of those extracted at birth might be drawn, and the child left disfigured for life.

When the four front teeth of each jaw have made their appearance, children seldom suffer much pain till the four last of the milk teeth begin to push forward ; they are the canine, or more generally known as the eye-teeth, from a supposed connection with the eye ; but the same observation applies to them as to the other cases of difficult dentition ; viz. attention to the general state of the body, and the use of the lancet, by a semi-circular incision made under the point of the tooth when sufficiently advanced.

At about three years of age, the whole of the first set have made their appearance, and are composed of twenty teeth, ten in each jaw. Children now suffer nothing from the progress of the second set that is going on under the gums. They sometimes suffer toothache from the first teeth decaying before the others are ready to supply their place ; this is owing, in a great measure, to a want of cleanliness, in not using a tooth-brush. We must here notice one of those prejudices which it is difficult to account for, viz. the obstinacy with which some mothers refuse to allow their children's teeth to be cleaned. We have no hesitation in saying, that as soon as it is possible to make the child open its mouth, the teeth it may have ought to be rubbed ; in very early age, a sponge is sufficient. A child ought to be taught to brush his teeth as soon as he is taught to wash his hands and comb his hair. As to the supposition that the brush will wear the enamel away, it might be argued

with equal truth that the comb will wear the head away.—*Mortimer's Observations.*

OPIUM.

[Continued from page 104.]

WITH regard to the toxicological effects of opium, we find that it is destructive both of animal and vegetable life. Dr. Marcet has informed us, that a bean-plant was destroyed in a day and a half by a solution of opium. Dr. Monro found, as far back as the year 1754, that a solution of opium applied even to the skin of frogs, rendered them motionless, and killed them. Melier was struck with the fact of the death, suddenly, of leeches, applied to the body of a child who had been poisoned by too strong an injection of poppy-heads.

It is a question of no small importance, and one which has not been altogether satisfactorily answered—What is the smallest quantity of opium that will prove fatal? It has been said four grains of solid opium; and the best authenticated case is one which will be found in the admirable work on poisons, by Dr. Christison; it was related to him by Dr. W. Brown. A dose of four grains and a half killed an adult—it was combined with nine grains of camphor. The man took the opium at seven in the morning for a cough, at nine his wife found him in a deep sleep, from which she could not arouse him. Nothing was done for his relief till three in the afternoon, when Dr. Brown was called to him, and found him laboring under all the usual symptoms of poisoning by opium, contracted pupils amongst the rest. Death ensued in an hour, notwithstanding the active employment of remedies. A case of fatal narcotism has lately excited a good deal of attention amongst the medical men in Paris. It was produced by twelve drops of laudanum, used as a lavenement, for a patient under the care of M. Rayer, in the Hopital de la Charité, and death occurred in eighteen hours. It has been said by Orfila, in his *Toxicologie Générale*, that opium acts more energetically when introduced into the rectum than administered by the stomach, but certainly such a result from so minute a quantity could never have been foreseen. Dr. Christison states, that he has given, by injection, without producing more than the usual somnolency, two drachms, by measure, of laudanum. In examining the details of cases, and more particularly in looking through the vast number that medical men have very judiciously sent to the periodical medical journals, I am quite astonished at the largeness of the doses that have been taken by suicides, and yet with proper care they have recovered from their poisonous effects. In one of the German journals there is a female described as recovering after having swallowed no less a quantity than eight ounces of crude opium. It seems to me, however, that the poison taken in tincture proves fatal in much smaller doses than in the solid form, and this is probably to be accounted for by the length of time which the stomach must take to dissolve a large mass, and in the interim some of the symp-

toms which excite alarm are perceptible, and remedial agents are employed; but where the tincture has been taken the peculiar sopor may supervene within twenty minutes. Much, too, will always depend on the fulness or emptiness of the stomach; thus, opium taken fasting in the morning, will produce its effects much more rapidly and certainly than at any other time in the day; and after a meal it is very likely to be vomited back. I think, from all that I have been able to collect, that I should draw the conclusion, that two drachms of tincture of opium might, under some circumstances, act as a destroyer of life tolerably quickly; still, however, I should well weigh all the circumstances before I should believe such a dose of properly-formed tincture to have proved fatal. About six grains of solid opium could not be taken with impunity by those unaccustomed to it. There is a very curious, and it might prove a fatal mistake, in one of the editions of Buchan's Domestic Medicine; the invalid is there cautioned against taking too large a dose of laudanum, and, by inadvertency, instead of twenty-five drops, he is advised never to take more than twenty-five ounces.

The first stage, or that of excitement, after the administration of opium, I have shown to you is characterized by a train of phenomena which do not result from the employment of any other drug with which we are acquainted; so, likewise, is the last stage, or that of collapse, marked by some symptoms which more particularly distinguish it. There is a deep sleep, or, as it is termed, sopor, usually attendant upon it, which forms a diagnostic feature, and which, although it may occasionally be found to follow upon the other narcotics, is most strikingly characteristic of this powerful juice. There is an overpowering lethargic state, from which you may for a moment arouse the individual into apparent sensibility; but he instantaneously relapses into a perfect suspension of his faculties. Delirium very rarely occurs; and although we have on record some cases in which convulsions were present, yet they may be considered as very unusual. Almost all the other narcotic poisons are attended by delirium and convulsions as the ordinary symptoms. Conium, or hemlock, exhibits a state nearer approaching to that of opium than the other narcotics; still, coma and convulsions are, generally speaking, present. Where henbane or hyoscyamus has been taken, that union between coma and delirium which is called typhomania, is observed. Belladonna causes delirium and coma; the delirium is often of an agreeable character, accompanied by uncontrollable fits of laughter, and very often there is no sopor. Datura stramonium, or the thorn apple, causes maniacal delirium, with singing and dancing. Nicotiana tabacum, or tobacco, excites convulsions and universal tremor. *Æthusa cynapium*, or dog's parsley, is marked by spasmodic pain of the stomach, and difficulty of breathing; *aconitum napellus*, or monk's hood, by maniacal delirium; *helleborus niger*, or black hellebore, is followed by delirium and high irritation; and the fox-glove, or *digitalis*, by delirium and general convulsions; the *strychnos nux vomica* by dreadful agitation and alarm. Extreme cold produces a sopor, and an irresistible sleepiness, that has an approximation to the effects of opium, more nearly than any of the narcotics I have enumerated; and the deleterious fumes arising from burn-

ing charcoal cause a somewhat similar state ; still it is more nearly allied to asphyxia.

The other symptoms which accompany an inordinate quantity of opium, may be found as the consequences of the narcotics generally, nor do they afford us any very striking diagnostic marks. They likewise vary according to the age, the sex, the habits of the patient, and to the dose that has been taken. Thus, although the face is most generally observed to be pale, there are not wanting instances in which it is described to be flushed. In some cases the breathing is apparently easy, and almost natural ; whilst again, in others, it is stertorous and performed with great difficulty ; the pulse is generally feeble and irregular, yet this is by no means a uniform occurrence ; the skin is cold, shrunk, and bedewed with a clammy sweat, and has been known, occasionally, to have been imbued with the characteristic odor of opium ; the extremities are very generally cold ; the eyes are closed, and on lifting the eyelid the pupil is found to be dilated, and insensible to the stimulus of light. Vomiting occurs, occasionally, at various periods after opium has been taken. Dr. Crumpe, whose ardent love of science, and whose anxious investigation of truth led him to try numerous experiments, which he has admirably detailed in his inquiries into the nature and properties of opium, tells us that he himself, when trying experiments on the different parts of opium, often vomited up what appeared to him the entire quantity of the medicine he had taken, after its having affected him in a very violent manner. It is very singular that a pill of opium, administered at night, will be vomited up in the morning, after having produced its narcotic effect. This is an observation which Van Swieten originally made.

Persons who outlive twelve hours after opium has been taken, very commonly recover, death usually occurring about eight or nine hours after the dose, though there are instances narrated where it has occurred within four hours. The symptoms during life are those, first, of sanguineous acceleration to the brain, in the stage of excitement ; and, secondly, of reaction in the stage of venous retardation ; and in the third stage of congestion, and where, from the largeness of the dose, the two first states are too transient to be perceptible, the intensity of action upon the nervous system is marked only by the fatal impression produced, the collapse is immediate. Under such circumstances the indications to be followed are to remove the exciting cause, and to obviate the proximate, and these are borne out by the appearances which present themselves where examinations have taken place after death. It is not within the scope of this course of lectures to dwell upon that which morbid anatomy must illustrate to you, but as it is a most important point to be attended to, whether as regards the mode of action of opium upon the system, or the treatment which is to be pursued, I must observe to you that the vessels of the brain are generally turgid with blood, that sometimes a watery fluid has been exhaled from them into the ventricles, and that throughout the cerebral mass there is every mark of sanguineous engorgement. Nor must I pass over the generally observed fact, that the blood is ordinarily found fluid throughout the body.

BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, MAY 10, 1837.

ILLUSTRATIONS OF PULMONARY CONSUMPTION.*

A SECOND edition of this excellent and certainly very important pathological treatise on the banè of the north—*consumption*, a sirocco which sweeps youth and beauty at all seasons, by an irresistible impulse, to the grave—has been given to the public by the original publisher, Mr. E. C. Biddle, of Philadelphia.

Others may have written as learnedly as Dr. Morton—certainly more obscurely—but no one has been more successful, in this country, in concentrating facts in a way to be serviceable to the profession, upon the exclusive subject of pulmonary diseases. The delicacy of the respiratory apparatus, and the extreme difficulty of ascertaining with any degree of certainty the actual condition of the lungs, when functional derangement exists, render a practical guide like this of peculiar value to the general practitioner. Here, in New England, quackery flourishes in perennial vigor—and the hobby of many itinerants is consumption. Concealed, as the breathing organs are, beyond the reach of vulgar eyes, it matters not what sort of treatment is pursued, or how badly they are managed: the fee is the great object, and not the cure. It is a mortifying confession to make in this enlightened age, that empirics have had a general monopoly of consumptive patients, at the very doors of some of the best physicians in this section of country—not always because they have been considered the best informed of the two, but because the one had honesty enough to confess his inability to prescribe with any degree of certainty. The hit or miss prescriptions, on the other hand, of those who never knew enough of the anatomical construction of any part of the body to fear to do anything, have so long been considered the evidence of intuitive knowledge of the mysteries of organic life, that they have had an uncontrolled sway where modest merit could not have had a hearing.

In this able treatise, there is such precision, such manifest exactness, and in fact such positive rules for determining the signs of phthisis, that the book must grow in favor. That chapter expressly treating of the complication of consumption with other disease, gives a finish to the book, and without it there would have been a striking void. It is desirable to have Dr. Morton's investigations extensively circulated, which we hope this brief notice will in some measure have a tendency to effect.

It is not our intention to be very minute in the description of the work, further than to remark that it is a beautifully printed octavo, of three hundred and thirty-nine pages, with thirteen colored plates, not to be excelled, illustrative of diseased appearances. The appendix, which is of a popular character, might be read advantageously by any intelligent in-

* Illustrations of Pulmonary Consumption, its anatomical characters, causes, symptoms and treatment, to which are added some remarks on the climate of the United States, the West Indies, &c., with thirteen plates, drawn and colored from nature. Second edition. By Samuel George Morton, M.D., &c. &c. Philadelphia, E. C. Biddle. 8vo. pages 339.

valid. A few, only, have the happy faculty of writing in a manner to be understood and appreciated by all classes of readers; Dr. Morton is evidently one of them, and we congratulate him on the certain influence which his writings are destined to have in this and other countries.

PRACTICE OF MEDICINE IN SIAM.

FROM the Journal of Dr. Bradley, a missionary physician, located at Bangkok, the capital of Siam, several amusing anecdotes, illustrative of the character of medical practice in that country, have been quoted.

On the 8th of January, 1836, Chowfah sent his boat to Dr. Bradley, desiring him to visit his mother, the ex-queen, with an express wish that he should be accompanied by Mrs. Bradley. On their arrival at the imperial residence, and before the preparations were completed for ushering the doctor into the mother's presence, the prince amused them with a singular musical performance. It was exceedingly sweet and spirit-stirring, although the pipes of the organ, for such the instrument appeared to be, resembled more a bundle of bean poles, than harmoniously constructed tubes. All things being ready, a favorite female servant entered the apartment, and falling on her hands and knees, announced the solemn message to the royal son, that the queen was waiting. Mrs. Bradley and her husband, in passing through the palace grounds to reach the imperial apartment, noticed a multitude of females: the prince walked at a very respectful distance in the rear. As the women caught sight of the great man of royal line, they fell on their faces to the ground. The conductress labored hard to impress Dr. B. with the propriety of his humbling himself in the like manner when he came into the royal presence; but he insisted upon it, that as it was not an American custom, he should not comply with the request.

Her ex-majesty's throne was surrounded by a dozen or more princesses, on the floor in front. Dr. B. and lady were allowed to sit a little higher. The queen not yet being present, a princess was examined, by request. While doing this, the great woman entered through a side door and took her seat. Mrs. B. boldly walked up, at which her serene highness frowned most terribly. Being asked about her health, she answered, peevishly, "I am not at all well, I want to see the doctor." Dr. B. took the liberty of leaving the princess, on hearing this, and saluted her majesty as he would a woman of rank in any country. She appeared much surprised that a doctor, whose fame had been trumpeted abroad, should be obliged to ask questions for information before he could pronounce the disease and prescribe a cure. She was unprepared for this process of examining into symptoms, as the Siamese physicians only look at the patient, and at once decide upon all points touching both the malady and the remedy. The son necessarily acted as interpreter—but in so doing approached his mother in couching posture, without presuming to look her in the face. "I ventured," says Dr. B., "to give the queen, in plain terms, my opinion of those men who pretended to be gifted with the intuitive wisdom she had expected in me. I told her that those who make the greatest pretensions to such power, were really the most ignorant, and that extreme ignorance always fostered the basest quackery. I gave her a little account of American and European physicians, and told her that the best informed among them were the least disposed to make any pretensions to supernatural wisdom and skill. After ascertain-

ing her complaints, I prescribed for her. She inquired, with much solicitude, if there would be any spirit in the medicine. On being told there would not, she expressed great approbation, with a strong disapprobation of everything that contains *lon* (ardent spirit). She asked many questions about our country ; how long we were coming ; how much we paid for our passage, and how long we intended to stay. Having remained in her presence nearly an hour, we took our leave after American fashion, and withdrew, while her highness, her royal attendants and scores of females, slaves and children, prostrate at the door, gazed upon us with the most intense curiosity. The sight of husband and wife walking together, and, much more, arm in arm, was what they had never before seen, and was most strangely diverse from Siamese custom."

Dr. Bradley's patients, at the last advices, had become so numerous, that he had a floating dispensary on the river. Both sides of the river, from six to eight miles in extent, embraced by the city of Bangkok and its suburbs, are lined with floating houses. On the 12th of February, he wrote a hundred and twelve prescriptions. Among his patients, are many priests, an influential and crafty body of men.

On the seventh of April he was sent for by Chowpahyai (*great lord of heaven*), a brother of the king and one of the chief priests of the kingdom. He is the rightful heir to the throne, which was usurped from him by the present monarch. He took upon himself a vow of perpetual retirement, that he might be spared the humiliation of bowing down to one who is truly his inferior. This kingly brother is the one who permitted Capt. Coffin, a few years ago, to bring the Siamese twins to Boston. Being seated, although all others were standing in the great man's presence, "I found him much diseased. His disease is denominated *wind* by the native physicians. It had been treated with local applications and internal medicines of a heating kind. I spent considerable time to convince the patient and the physicians that the idea of wind being the cause of the disease was all humbug. The patient and his brother were quick to perceive the truth of my assertions by my illustrations, and then labored hard to bring over the native physicians to the same belief. They, however, were not ready to give up their darling notion, which is the main pillar of all their theory." When Dr. Bradley had taken leave of the exalted divine, he was conducted to a little brick building, about 12 feet square, open on all sides, in which was spread a little table, in American style, loaded with a variety of meats, fruits, and cakes, especially collected on his account. While eating, the servants of various grades gathered about in crowds to witness the novel process, which was regarded in the light of an extraordinary exhibition.

April 27th, by appointment, Dr. Bradley visited the king of Ligore. The audience room in which he was, would comfortably seat several hundred persons. All the posts, a dozen or so in number, were thickly studded with tumbler lamps ; there were also between twenty and thirty large European hanging lamps in the same apartment. Having been accommodated with flag-bottomed chairs, several women, supposed to be his majesty's wives, were admitted, three of whom sat by the side of the king. Tea was served, of the choicest kind, cakes and macprangs, a kind of fruit similar to the plumb. A prince royal being prescribed for, his majesty followed ; and a princess, a daughter, presented her wrist for examination on account of a slight tumor. A dose of salts was meted out

to the king, but on the following day, when Dr. Bradley called, the king said he was afraid they were poison, so he ordered the medicine to be taken by a stout healthy man, in his presence—if no injury came from the experiment, he intended then to take some himself.

May 2d, the patients had multiplied beyond all calculation. Many came from Zuthia, Samkok, Paklot and Packnam, and from countries to the east and west—a certain evidence of the extensive reputation of the missionary, whose success in practice, thus far, has been particularly fortunate. On one occasion, the king of Ligore expressed a desire to have Dr. Bradley see a woman of high rank and distinction, in company with fifteen or twenty of the royal household faculty. The case was a large tumor of two or three months standing, on the back. A principal object to be attained in this consultation seemed to be to constrain the doctor to say decidedly whether it could be cured or not; and if curable, to specify how long a time would be required; but as he could answer neither question, positively, his counsel appears to have been quite unsatisfactory to all parties.

Boston Society of Natural History.—A discourse was pronounced by the Rev. Mr. Winslow, on the anniversary meeting of this Society, last Wednesday. It was of a high order, and should be published for general circulation. The cabinet is in a flourishing condition. The addition of the beautifully prepared skeleton of an Asiatic elephant, gives a finish to the osteological department, which no other association of a similar kind in New England can boast of. As a whole, the collection is thought to be superior to any other in the United States.

Medical Miscellany.—The Boston City Government have conferred on a Committee the power to erect a hospital for idiots and insane persons, for the Houses of Correction and Industry, provided the cost does not exceed \$30,000.—There are between thirty and forty physicians in the City of Chicago, with a population of only eight thousand.—A boy, twelve years of age, recently died in Montreal, of hydrophobia, in dreadful agony.—The influenza has been unusually prevalent and fatal in some parts of Kentucky; at Frankfort, many children have died.—M. Dureau de Carnalle, Surgeon in Chief of the French Army in Algiers, has communicated to the Institute that he has seen a beautifully white woman, the wife of Sadi Hamet, who came from the interior of Africa, where, it is believed, a race of whites exist, who have heretofore been unknown to travellers.—Some very extraordinary experiments have been making, of late, on a female somnambule, at Cambridge.—Mons. Poyen is said to be developing new facts in animal magnetism on the borders of New Hampshire.—The Woodstock Medical School is well sustained the present season.—Dr. Brewer has made an improvement in his celebrated pessary, which he considers of great value. He will give some account of it soon.—The use of Faneuil Hall has been granted to the Mass. Medical Society, for their approaching anniversary meeting.—Mr. Vance, a distinguished surgeon, has recently lost his life in England, by being thrown over the banister of a flight of stairs. He fell to the bottom, and received a severe injury on the head, which ended in death six days after.—The plague has abated at Smyrna, but was carrying off a hundred a day at Tripoli, at the last accounts.

TO CORRESPONDENTS.—Dr. Parker's Case of Retained Placenta, Dr. A.'s Case of Poisoning with Lead, and Dr. Prather's Case of Disease of the Eye, were received too late for insertion in this number.

DIED.—At Keene, N. H., Dr. Thomas Edwards, aged 80 years, formerly an extensive practitioner of medicine.—In Norwich, Ct. Dr. Philemon Tracy, aged 80.

Whole number of deaths in Boston, for the week ending May 6, 35. Males, 9—Females, 26.

Consumption, 6—apoplexy, 1—old age, 4—lung fever, 4—inflammation of the brain, 1—infantile, 2—sudden, 1—scarlet fever, 1—inflammation of pleura, 1—delirium tremens, 1—dropsy on the brain, 2—disease of the heart, 1—intemperance, 1—inflammation of chest, 1—fits, 1—canker rash, 1—dropsy, 2—rheumatic, 1.

PROLAPSUS UTERI CURED BY EXTERNAL APPLICATION.

DR. A. G. HULL'S UTERO-ABDOMINAL SUPPORTER is offered to those afflicted with *Prolapsus Uteri*, and other diseases depending upon relaxation of the abdominal muscles, as an instrument in every way calculated for relief and permanent restoration to health. When this instrument is carefully and properly fitted to the form of the patient, it invariably affords the most immediate immunity, from the distressing "dragging and bearing down" sensations which accompany nearly all visceral displacements of the abdomen, and its skilful application is always followed by an early confession of radical relief from the patient herself. The Supporter is of simple construction, and can be applied by the patient without further aid. Within the last two years 700 of the Utero-Abdominal Supporters have been applied with the most happy results.

The very great success which this instrument has met, warrants the assertion, that its examination by the Physician will induce him to discard the disgusting pessary hitherto in use. It is gratifying to state, that it has met the decided approbation of every member of the Medical Faculty who has applied it, as well as every patient who has worn it.

The Subscribers having been appointed agents for the sale of the above instruments, all orders addressed to them will be promptly attended to. Price, \$10.

LOWE & REED, Boston; DAVID KIMBALL, Portsmouth, N. H.; JOSHUA DURGIN, Portland, Me., JOSEPH BALCH, JR., Providence, R. I.; ELISHA EDWARDS, Springfield, Mass.; N. S. WORDEN, Bridgeport, Conn. Oct. 5—6m

TO MEDICAL STUDENTS.

THE undersigned are associated for the purpose of instructing in all the branches of Medicine and Surgery. A suitable room will be provided, and pupils will have the use of an extensive medical library, opportunities for seeing the practice of one of the districts of the Dispensary and of the Eye and Ear Infirmary, and of attending a course of lectures on the diseases of the eye.

A regular course of recitations and examinations will include all the required professional works.

Anatomical instruction and private dissection will form a prominent part in the study of the pupils. For further information, apply to either of the subscribers.

Franklin Street, Nov. 9, 1836.

N16—1f

JOHN JEFFRIES, M.D.
R. W. HOOPER, M.D.
JOHN H. DIX, M.D.

RETREAT FOR INVALIDS.

THE profession is respectfully informed that Dr. A. H. WILDER has purchased a large and convenient house in the pleasant town of Groton, Mass., likewise suitable carriages, horses, saddles, &c., for the accommodation of nervous invalids. April 12—3t

MEDICAL INSTRUCTION.

THE Subscribers have associated for the purpose of giving instruction to Medical Students. Opportunities will be afforded for the observation of diseases and their treatment in one of the Dispensary Districts and at the House of Industry; and clinical instruction will be given on the cases. Weekly Lectures and Recitations will be given on the various branches of Medical Science, and ample opportunities afforded for the cultivation of Practical Anatomy. Special attention will be paid to the exploration of diseases of the Heart and Lungs.

Applications may be made to either of the Subscribers.

Nov. 30.

MARSHALL S. PERRY, M.D.
AUGUSTUS A. GOULD, M.D.
HENRY I. BOWDITCH, M.D.
HENRY G. WILEY, M.D.

TO MEDICAL STUDENTS.

H. A. DEWAR, M.D. intends forming a class for the study of Dentistry, in every branch. The number will be limited, and each student will have an opportunity of becoming practically acquainted with all the operations and manipulations requisite. Dr. D. has provided a large and commodious work-room for their exclusive use. Further particulars may be learned by calling on Dr. Dewar, No. 1 Montgomery Place. 1f—Oct. 19

Boston, Oct. 7, 1836.

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